

# COMMONWEALTH of VIRGINIA

# DEPARTMENT OF MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES

JAMES S. REINHARD, M.D. COMMISSIONER

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July 18, 2007

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#### ADDENDUM NO. 1 TO ALL OFFERORS:

Reference:

Reguest for Proposal; - #720C-04106-07M

Title:

Bedside Glucose Monitoring System

Dated:

June 14, 2007

RFP Due:

August 7, 2007 - 3:00 PM EST (Revised)

The above referenced Request for Proposal is hereby amended as follows:

The Proposal due date/time is hereby changed from the original due date/time of Tuesday – July 24, 2007 at 3:00 PM EST. The new due date/time is as follows:

Proposals will be received for furnishing services described herein until:

Tuesday - August 7, 2007 - 3:00 PM EST

Please <u>replace</u> in Section 8.0 (Special Terms and Conditions), Number 8.9 with the following revised Special Term and Condition:

## 8.9 SMALL BUSINESS SUBCONTRACTING AND EVIDENCE OF COMPLIANCE:

A. It is the goal of the Commonwealth that 40% of its purchases be made from small businesses. This includes discretionary spending in prime contracts and subcontracts. All potential Offerors are required to submit a Small Business Subcontracting Plan. Unless the Offeror is registered as a DMBE-certified small business and where it is practicable for any portion of the awarded contract to be subcontracted to other suppliers, the contractor is encouraged to offer such subcontracting opportunities to DMBE-certified small businesses. This shall not exclude DMBE-certified womenowned and minority-owned businesses when they have received DMBE small business certification. No Offeror or subcontractor shall be considered a Small Business,

- a Women-Owned Business or a Minority-Owned Business unless certified as such by the Department of Minority Business Enterprise (DMBE) by the due date for receipt of bids or proposals. If small business subcontractors are used, the prime contractor agrees to report the use of small business subcontractors by providing the purchasing office at a minimum the following information: name of small business with the DMBE certification number, phone number, total dollar amount subcontracted, category type (small, women-owned, or minority-owned), and type of product/service provided.
- B. Each prime contractor who wins an award in which provision of a small business subcontracting plan is a condition of the award, shall deliver to the contracting agency or institution on a **quarterly** basis, evidence of compliance (subject only to insubstantial shortfalls and to shortfalls arising from subcontractor default) with the small business subcontracting plan. When such business has been subcontracted to these firms and upon completion of the contract, the contractor agrees to furnish the purchasing office at a minimum the following information: name of firm with the DMBE certification number, phone number, total dollar amount subcontracted, category type (small, women-owned, or minority-owned), and type of product or service provided. Payment(s) may be withheld until compliance with the plan is received and confirmed by the agency or institution. The agency or institution reserves the right to pursue other appropriate remedies to include, but not be limited to, termination for default. (See Attachment A in the original RFP)
- C. Each prime contractor who wins an award valued over \$200,000 shall deliver to the contracting agency or institution on a quarterly basis, information on use of subcontractors that are not DMBE-certified small businesses. When such business has been subcontracted to these firms and upon completion of the contract, the contractor agrees to furnish the purchasing office at a minimum the following information: name of firm, phone number, total dollar amount subcontracted, and type of product or service provided.

Please add ATTACHMENT D, Small Business Subcontracting Plan to the RFP. Each Offeror shall be required to complete and return ATTACHMENT D with the Proposal.

# Attachment D - Small Business Subcontracting Plan

#### Definitions

<u>Small Business</u>: "Small business " means an independently owned and operated business which, together with affiliates, has 250 or fewer employees, or average annual gross receipts of \$10 million or less averaged over the previous three years. Note: DMBE-certified women- and minority-owned businesses shall also be considered small businesses when they have received DMBE small business certification.

<u>Women-Owned Business</u>: Women-owned business means a business concern that is at least 51% owned by one or more women who are citizens of the United States or non-citizens who are in full compliance with United States immigration law, or in the case of a corporation, partnership or limited liability company or other entity, at least 51% of the equity ownership interest is owned by one or more women who are citizens of the United States or non-citizens who are in full compliance with United States immigration law, and both the management and daily business operations are controlled by one or more women who are citizens of the United States or non-citizens who are in full compliance with the United States immigration law.

<u>Minority-Owned Business</u>: Minority-owned business means a business concern that is at least 51% owned by one or more minority individuals or in the case of a corporation, partnership or limited liability company or other entity, at least 51% of the equity ownership interest in the corporation, partnership, or limited liability company or other entity is owned by one or more minority individuals and both the management and daily business operations are controlled by one or more minority individuals.

All small businesses must be certified by the Commonwealth of Virginia, Department of Minority Business Enterprise (DMBE) by the due date of the solicitation to participate in the SWAM program. Certification applications are available through DMBE online at www.dmbe.virginia.gov (Customer Service).

| Bidder Name:   |       |
|----------------|-------|
| Preparer Name: | Date: |

#### Instructions

- A. If you are certified by the Department of Minority Business Enterprise (DMBE) as a small business, complete only Section A of this form. This shall not exclude DMBE-certified women-owned and minority-owned businesses when they have received DMBE small business certification.
- B. If you are not a DMBE-certified small business, complete Section B of this form. For the bid to be considered and the bidder to be declared responsive, the bidder shall identify the portions of the contract that will be subcontracted to DMBE-certified small business in Section B.

## Section A

| If your firm is certified by the Department of Minority Business Enterprise (DMBE), are you certified as a (check only one below): |                                   |                     |  |  |  |
|--|-----------------------------------|---------------------|--|--|--|
|  | Small Business                    |                     |  |  |  |
| ***************************************  | Small and Women-owned Business    |                     |  |  |  |
|  | Small and Minority-owned Business |                     |  |  |  |
| Certification number:  |                                   | Certification Date: |  |  |  |

# Section B

Populate the table below to show your firm's plans for utilization of DMBE-certified small businesses in the performance of this contract. This shall not exclude DMBE-certified women-owned and minority-owned businesses that have received the DMBE small business certification. Include plans to utilize small businesses as part of joint ventures, partnerships, subcontractors, suppliers, etc.

#### B. Plans for Utilization of DMBE-Certified Small Businesses for this Procurement

| Small Business Name & Address  DMBE Certificate # | Status if Small Business is also: Women (W), Minority (M) | Contact<br>Person,<br>Telephone<br>& Email | Type of<br>Goods<br>and/or<br>Services | Planned<br>Involvement<br>During Initial<br>Period of the<br>Contract | Planned<br>Contract<br>Dollars<br>During<br>Initial<br>Period of<br>the Contract |
|---|---|--|--|---|--|
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|   |   |  |  |   |  |
| Totals \$   |   |  |  |   |  |

Sincerely,

Michael J. Oprysko, CPPB,VCO
Contract Manager
(804) 786-6562

| Please have an authorized representative sign and date below and | d return with your proposal: |
|--|------------------------------|
| Signature:   |                              |
| Print Name:  |                              |
| Date:  |                              |
| Company Name:  |                              |

Title: